

APPLICATION DATA SHEET

I. Application Information

- (a) Application type : **Regular**
- (b) Subject Matter (check one):
1. ☒ Utility
 2. ☐ Design
 3. ☐ Plant
- (c) Title of Invention : **AMMONIA STORAGE**
- (d) Attorney Docket Number : **RR-497 PCT/US**
- (e) Total Drawing Sheets : **0**
- (f) Small entity (check one) :
1. ☐ Yes
 2. ☒ No

II. Applicant Information

1. INVENTOR ONE

First Name:	Malcolm
Middle Name:	Timothy
Last Name:	FROST
Name Suffix (Jr., Sr., III, etc.):	

RESIDENCE

City:	Kenmore Hills QLD 4069
State/Province:	
Country:	AUSTRALIA

MAILING ADDRESS

Street:	104 Creekside Street
City:	Kenmore Hills
State/Province:	
Country:	AUSTRALIA
Postal or Zip Code:	QLD 4069

APPLICATION DATA SHEET (con't)

II. Applicant Information (con't)

2. INVENTOR TWO

First Name:	Raymond
Middle Name:	Louis
Last Name:	KOENIG
Name Suffix (Jr., Sr., III, etc.):	

RESIDENCE

City:	Fig Tree Pocket QLD 4069
State/Province:	
Country:	AUSTRALIA

MAILING ADDRESS

Street:	5 Quinty Street
City:	Fig Tree Pocket
State/Province:	
Country:	AUSTRALIA
Postal or Zip Code:	QLD 4069

3. INVENTOR THREE

First Name:	Peter
Middle Name:	James
Last Name:	TAIT
Name Suffix (Jr., Sr., III, etc.):	

RESIDENCE

City:	Moorooka QLD 4105
State/Province:	
Country:	AUSTRALIA

MAILING ADDRESS

Street:	62 Currey Avenue
City:	Moorooka
State/Province:	
Country:	AUSTRALIA
Postal or Zip Code:	QLD 4105

APPLICATION DATA SHEET (con't)

II. Applicant Information (con't)

4. INVENTOR FOUR

First Name:	Gregory
Middle Name:	John
Last Name:	SHEEHAN
Name Suffix (Jr., Sr., III, etc.):	

RESIDENCE

City:	Chapel Hill QLD 4069
State/Province:	
Country:	AUSTRALIA

MAILING ADDRESS

Street:	9 Jillian Street
City:	Chapel Hill
State/Province:	
Country:	AUSTRALIA
Postal or Zip Code:	QLD 4069

III. Correspondence Information

Correspondence Customer Number	: 020427
Name	: Rodman & Rodman
Street of Mailing Address	: 7 South Broadway
City of Mailing Address	: White Plains
State or Province of Mailing Address	: New York
Postal or Zip Code	: 10601
Phone Number	: (914) 949-7210
Fax Number	: (914) 993-0668

IV. Representative Information

Representative Customer Number	: 020427
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APPLICATION DATA SHEET (con't)

V. Domestic Priority Information

Application	Continuity Type	Parent Application Number	Parent Filing Date MM/DD/YY
This application is	National Stage of	PCT/AU01/01132	09/10/01
This application is	CON/DIV/CIP of		

VI. Foreign Priority Information

Country	Application Number	Filing Date MM/DD/YY	Priority Claimed (Yes or No)
International	PCT/AU01/01132	09/10/01	YES
Australia	PR0001	09/08/00	YES

VII. Assignee Information

1. ASSIGNEE NAME: **Australian Magnesium Operations Pty Ltd**

ADDRESS

Street:	Level 6, 9 Sherwood Road
City:	Toowong
State/Province:	
Country:	AUSTRALIA
Postal or Zip Code:	QLD 4066

2. ASSIGNEE NAME: **Commonwealth Scientific and Industrial Research Organisation**

ADDRESS

Street:	Limestone Avenue
City:	Campbell
State/Province:	
Country:	AUSTRALIA
Postal or Zip Code:	ACT 2612